

PATENT ✓

Atty. Docket No.: 2500 DIV 2 CON 2 DIV 3 CON 6
(203-3515 DIV 2 CON 2 DIV 3 CON6)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Peter M. Bonutti

Examiner: Matthew John Kasztejna

Serial No.: 10/743,125

Group: Art Unit : 3739

Filed: December 22, 2003

Dated: February 1, 2008

For: **FLUID OPERATED RETRACTORS**

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDIT. RATE FEE	ADDIT. RATE FEE
TOTAL	*13 MINUS ** 20	= 0	X 25 \$	X 50 \$ 0	
INDEP.	* 3 MINUS ** 3	= 0	X 100 \$	X 200 \$ 0	
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			X 180 \$	X 360 \$ 0	
			TOTAL	OR TOTAL	\$ 0
			ADDIT. FEE	\$ -0-	

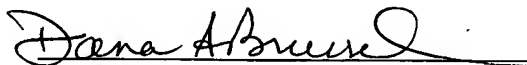
No additional fee is required.

- * If the entry in Co. 1 is less than entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".
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The Highest No. Previously Paid For (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

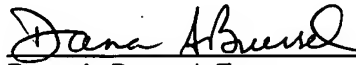
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the: Mail Stop AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on date below.

Dated: February 1, 2008


Dana A. Brussel

- ☐ Please charge Deposit Account No. 21-0550 in the amount of \$____. Two (2) copies of this sheet are enclosed.
- ☐ A check in the amount of \$____ is enclosed.
- ☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 21-0550. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 21-0550 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



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